Town of Upper Marlboro

Building Improvement Program Application



Please complete the information below

Pa	rt A: Section 1-Applicant		
Ci	rcle One: Property Owner Business Owner		
	1. Property Owner Applicant contact information.		
Name			
	Address		
	PhoneEmail		
2. Business Owner Applicant contact information.			
Name			
Address			
	Phone Email		
	3. Business Name		
Pa	rt A: Section 2- Property		
(P	roperty Owner Only)		
1.	Gross area of building		
2.	Age of building		
3.	Number of businesses occupying the building		
4.	Number of vacant commercial units in the building		
5.	If all or part of the commercial portion of the building is vacant, how will the vacancies be filled and in what timeframe?		

6. How long have these units been vacant?

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Part B: The Project

	If any, describe other improvements made to the structure as part of a larger renovation of which this project is a part.		
5.	Total amount of reimbursement being requested		
4.	Total cost of improvement project		
	Provide and attach written, good faith, itemized quotes for the described planned improvements from qualified entities. Labor and materials costs must be separated. Identify preferred vendor(s) to complete the work. Please explain rationale if a vendor is chosen with a higher quote. Labor completed by the applicant is not reimbursable however materials only will be reimbursed at the appropriate percentage. LECTED VENDOR(S):		
2.	How does the improvement project comply with the Town of Upper Marlboro Design Guidelines?		
	improvement grant.		

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Part C: Local and State Approvals

- 1. Include any letter(s) or approval(s) from relevant local authorities (Prince George's County Department of Permits, Inspections and Enforcement; Historic Preservation Commission) stating proposed project meets local codes, etc. Please attach.
- 2. Applicant agrees to obtain all necessary permits prior to commencement of work and to complete work according to the applicable building codes. Upon approval, applicant must complete all work within 180 days, and submit paid receipts within 30 days of completion.
- 3. Applicant attests that the Business is in good standing according to State and Local policies

ture:	Date:
t D: SCWG Checklist	
Town of Upper Marlboro • 14211	ted application packet to: School Lane • Upper Marlboro, MD 2077; r email SCWG@uppermarlboromd.gov
Applic	eation Checklist
Attended mandatory pre-application meetin	ng on (provide date)
Completed and signed application form	
Color Photos of the project	
Color rendering or other conceptual graphic	e showing proposed improvements
Materials and color samples as per guidelin	es
Written bids from two contractors for work	to be completed

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Assessed value of the property and building per Maryland Department of Assessment and T	
Annual assessment	
If tenant, length of time left on l	ease
☐ Property Owner	☐ Tenant
Deed	Executed Lease Agreement
Paid property tax bill	Signed Written Authorization from Property Owner
Insurance Certificate	
Name of person accepting applica	tion:
Signature:	Date: